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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Winfrey, Adia, McClellan, Dr,										
	b) Address (number and street) PO Box 734 Check if address changed					Candidate's FEC Identification Number H8AL03062					
	(c) City, State, and ZIP Code					3. Is This		ew	Amende	d	
	Talladega		AL	. 3516	1	Staten	nent X (N) OR	(A)		
4.	Party Affiliation	5. Office Soug	jht		6. State & Dis	trict of Candid	date				
	DEMOCRATIC PARTY	House			AL	03					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) Committee to Elect Dr. Adia Winfrey											
	(b) Address (number and street) PO Box 734										
	(c) City, State, and ZIP Code										
	Talladega				AL	35161	I				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)										
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Signature of Candidate						Date					
W	ïinfrey, Adia, McClellan, Dr,		[Electronically Filed]			02/08/2018					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)